P.1

SFP 2 2 2005

"PATENT"

AMENDMENT TRANSMITTAL FORM

)

In re application of: David J. Baillargeon et al U. S. Serial No.: 09/498,793 [400100]

Filed: February 4, 2000

For: Formulated Lubricant Oils Containing

High-Performance Base Oils Derived From Highly

Paraffinic Hydrocarbons

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

)	Before the Examiner
)	Ellen M. McAvoy

Confirmation Number: 9309

) Group Art Unit: 1764

Family Number: P2000J038

CERTIFICATION OF	FACSIMILE TRANSM	NOISSIP

I hereby certify that this paper is being facsimile transmitted to the

Commissioner for Patents facsimile number 1-571-273-8300 on the date shown below.

Name of person signing certification Signature September 22,200

Transmittal herewith is an amendment/response in the above-identified application.

The fee for any changes in number of claims has been calculated as shown below.

(1)	(2) (3) Claims Remaining After	After (3)		(5) Present	(6)	(7)
	Amendment		Previously Paid For	Extra	Rate	
Total	*	<u> </u>	**			
Claims		Minus	l i	Ł	x 50.00	
Indep.	•		***			
Claims		Minus		<u> </u>	x 200.00	
MULTIPLE DEPENDENT CLAIM FEE					\$ 360.00	

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

The total fee for this RESPONSE and TERMINAL DISCLAIMER TO OBVIATE A DOUBLE PATENTING REJECTION OVER A PRIOR PATENT, including claim changes and any extension of time is calculated to be \$130.00

X Charge \$ 130.00 to DEPOSIT ACCOUNT NO. 05-1330.

X The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to **DEPOSIT ACCOUNT NO. 05-1330**.

9/21/05

DATE OF SIGNATURE

Post Office Address: [to which correspondence is to be sent]
ExxonMobil Research and Engineering Company
P. O. Box 900

Annandalc, New Jersey 08801-0900

MDM:kak

27810
PATENT TRADEMARK OFFICE

M. Men

ATTORNEY OR AGENT OF RECORD

MARK D. MARIN

Registration No. 50,842

X Pursuant to 37 CFR 1.34(a)

Facsimile Number: (908) 730-3649

BEST AVAILABLE COPY

^{**} If the "Higher Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.